

Bureau of
TennCare



Annual Report 2004-05



Service Delivery Network

- ◆ *MCOs*
- ◆ *BHOs*
- ◆ *PBM*
- ◆ *DBM*

MCOs

All TennCare enrollees are assigned to a Managed Care Organization (MCO) for their physical health care needs. Each of the eight MCOs are contracted to provide services to enrollees in a designated Grand Region of the state, with the exception of VHP which operates only in Davidson County and TennCare Select which operates statewide. TennCare Select serves as the state's "back-up" health plan in order to accept enrollment from failed health plans or in areas that may be underserved as well as the plan that provides medical services to

vulnerable and specialized populations as defined by the state. Table 4 illustrates the distribution of TennCare enrollment by MCO and by grand division.

The MCOs are responsible for providing a full range of health care services for each enrollee except that the following services are carved out and delivered by other entities: behavioral health, pharmacy, dental and long term care services.

Table 4

Distribution of TennCare Enrollment by MCO by Grand Region

Eligible recipients on December 31, 2004

MCO / Region*	East	Middle	West	Out of State**	Total	MCO Distribution
BHP	0	0	49,300	0	49,300	3.6%
BlueCare	259,900	0	0	0	259,900	19.1%
John Deere	87,200	0	0	0	87,200	6.4%
PHP	129,900	0	0	0	129,900	9.6%
TennCare Select	36,200	388,600	34,100	7,600	466,500	34.4%
UAHC	0	0	133,200	0	133,200	9.9%
TLC	0	0	193,300	0	193,300	14.2%
VHP	0	38,400	0	0	38,400	2.8%
Total	513,200	427,000	409,900	7,600	1,357,700	100.0%
Regional Distribution	37.8%	31.4%	30.2%	0.6%	100.0%	

*Individuals in counties bordering Grand Regions may show up differently when segregating between region by MCO & BHO assignment.

**Enrollees may live out of state for several reasons such as: attending an out of state college while maintaining Tennessee residency; physically living in a Tennessee border county with a contiguous out of state address; or residing in an out of state medical institution for a prolonged period.

BHOs

All enrollees are assigned to one of two Behavioral Health Organizations (BHOs) for their behavioral health needs. Generally, enrollees are assigned to a BHO based on their MCO assignment. Tennessee Behavioral Health (TBH) is partnered with John Deere, TLC, PHP, TennCare Select in East Tennessee and BlueCare in East Tennessee and Knox County. Premier Behavioral Systems of Tennessee, L.L.C. (Premier) is partnered with OmniCare, Better Health Plan, and VHP. TennCare Select in Middle and West Tennessee is also partnered with Premier. Children in state custody and enrollees living out-of-state are automatically assigned to Premier.

Effective July 1, 2004, TBH executed two separate contracts and/or amendments with the state of Tennessee.

1. TBH East – a full risk contract serving all enrollees in the East Tennessee Grand Region.
2. TBH Middle and West – a partial risk agreement for the remainder of the state.

Premier Behavioral Systems of Tennessee, L.L.C., has a no-risk contract serving enrollees in Middle and West Tennessee. A single management company, Advocare of Tennessee, provides management to both TBH and Premier.

Table 5 provides the information concerning the distribution of enrollees across BHOs, by grand division of the state.

Table 5

**Distribution of TennCare Enrollees by BHO and Grand Region
(Eligible recipients on 12/31/2004)**

Region \ BHO*	Premier	TBH	Total	Percentage
West	215,600	193,600	409,200	30.1%
Middle	422,600	6,100	428,700	31.6%
East	8,100	504,100	512,200	37.7%
Out-of-State	5,000	2,600	7,600	0.6%
Total	651,300	706,400	1,357,700	100.0%
Percentage	48.0%	52.0%	100.0%	

*Individuals in counties bordering Grand Regions may show up differently when segregating between region by MCO & BHO assignment.

PBM

First Health Services Corporation is the Pharmacy Benefit Manager (PBM) for TennCare. As TennCare's PBM, First Health processes drug claims for TennCare enrollees, manages the preferred drug list and point of sale edits, and conducts the retrospective drug utilization (retro DUR) program for the Bureau of TennCare.

DBM

Doral Dental is the Dental Benefits Manager (DBM) for TennCare. All dental claims are processed by Doral and all dental care is provided to enrollees through their provider network.

FY 2005 Network Concerns:

- **DBM** - TennCare exercised its prerogative not to renew its contract with the dental benefits manager (DBM), Doral Dental of Tennessee, LLC at the end of SFY 04/05. Although Doral Dental had performed well in managing dental benefits for TennCare enrollees over the three-year contract term, the State made the determination that it would re-bid the DBM contract through the RFP process. At the completion of that RFP process, Doral Dental was selected as the winning bidder. The new DBM agreement reduces state costs by \$3 million compared to the original contract.
- **MCOs** - One of the TennCare MCOs, OmniCare [now operating as United American Health Care (UAHC)], was placed under Administrative Supervision by Tennessee Department of Commerce & Insurance (TDCI) on April 5, 2005. Both TennCare and TDCI continue to monitor the company's performance.

TennCare Services

All TennCare-covered services must be medically necessary. As of July 1, 2004 TennCare covered services included the following:

- Community health services
- Convalescent care
- Dental services for enrollees under age 21 as medically necessary. Enrollees age 21 and over are eligible for dental benefits if they have a life-threatening infection, prosthetic heart valve, were severely immunocompromised, had a tumor of the oral cavity, had impacted wisdom teeth or an accidental injury to the oral cavity or teeth.
- Durable medical equipment
- Emergency ambulance transportation - air and ground
- EPSDT services for enrollees under age 21
- Home health care
- Home and Community-based Services (HCBS) for the developmentally disabled, mentally retarded, and/or elderly*
- Hospice care
- Inpatient and outpatient substance abuse benefits
- Inpatient hospital services
- Lab and X-ray services
- Medical supplies
- Non-emergency ambulance transportation
- Non-emergency transportation
- Nursing facility services (including Level I, Level II and ICF-MR facilities)
- Occupational therapy
- Organ transplants and donor organ procurements
- Outpatient hospital services
- Outpatient mental health services (including physician services)



- Outpatient substance abuse treatment programs
- Pharmacy services
- Physical therapy services
- Physician inpatient services
- Physician outpatient services/community health clinics/other clinic services
- Private duty nursing
- Psychiatric inpatient services
- Psychiatric physician inpatient services
- Psychiatric rehabilitation services
- Reconstructive breast surgery
- Renal dialysis services
- Sitter services
- Speech therapy
- 24-hour psychiatric residential treatment services
- Vision services for enrollees under age 21 as medically necessary

* HCBS and Nursing Facility services are provided outside the managed care setting.

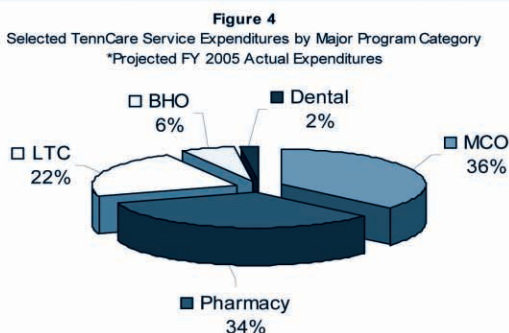


Table 8
Selected TennCare Service Expenditures by Major Program Category

MCO (Services Only)	\$2,647,097,700
Pharmacy	\$2,446,104,400
LTC	\$1,619,486,300
BHO	\$440,048,400
Dental	\$ 141,661,000
Total – Selected* Programs	\$7,294,397,800

* MCO Expenditure does not include MCO Administrative costs. Other costs not included are supplemental payments to hospitals, Medicare Crossover, educational costs, Bureau administrative costs and payments to the Dept. of Children's Services. The addition of these items, totaling \$1,274,894,300, would reflect the total cost of the TennCare program at \$8,569,292,100.

Pharmacy Services – Services Delivered Through the PBM



- TennCare utilizes a preferred drug list to manage the pharmacy benefit. Some drugs require prior approval.
- During FY 2005, 52 percent of TennCare-reimbursed prescriptions were generic and 48 percent were brand.
- Brand name drugs accounted for 84 percent of pharmacy expenditures, with an average cost per prescription of nearly \$100 for a brand name prescription, compared to approximately \$17 for a generic prescription.
- TennCare enrollees who utilized pharmacy services averaged 35.91 prescriptions per year in FY 04-05.

Table 9

Category of service	Providers with paid claims	FY 2005 recipients	Expenditures per recipient	FY 2004-2005 Expenditures
Pharmacy	1834	1,210,848	\$2020.16	\$2,446,104,400

* An adjustment reflecting the difference between accrual and cash-basis measures was made.

Table 10 – Top 5 Drugs By Number of Claims

Brand Name	Generic Name	Drug Type	Number of Prescriptions
Vicodin, Lortab, Various Other Brands	Hydrocodone Bitartrate/Acetaminophen	Narcotic	1,652,312
Protonix	Pantoprazole Sodium	Gastric acid reducer	1,278,470
Zocor	Simvastatin	Cholesterol lowering agent	851,414
Lasix	Furosemide	Diuretic	698,414
Xanax	Alprazolam	Anti-anxiety agent	661,693

Table 11 – Top 5 Drugs By Cost

Brand Name	Generic Name	Drug Type	Cost of Drug
Protonix	Pantoprazole Sodium	Gastric acid reducer	\$144,874,881
Zocor	Simvastatin	Cholesterol lowering agent	\$104,507,152
Seroquel	Quetiapine Fumarate	Antipsychotic	\$ 61,156,544
Zyprexa	Olanzapine	Antipsychotic	\$ 57,498,152
Neurontin	Gabapentin	Pain and seizure drug	\$ 45,241,645

Medical Services - Services Delivered Through MCOs

- Inpatient hospitalization rate was 132 per 1000 enrollees
- Average inpatient length of stay was 4.5 days
- Emergency room utilization was 750 per 1000 enrollees
- 80 percent of all TennCare enrollees visited a physician a least once during the year

Table 13 - Top 5 Diagnoses by Cost

Inpatient Hospital

1. Diabetes Mellitus
2. Disorders of fluid, electrolyte, and acid-base balance
3. Nondependent Drug Abuse
4. Septicemia
5. Short Gestation/Low Birth Weight

= 30.2 percent of all Inpatient Expenditures

Outpatient Hospital

1. Nondependent Drug Abuse
2. Diabetes Mellitus
3. Essential Hypertension
4. Other and unspecified disorders of joint
5. Other and unspecified disorders of back

= 18.2 percent of all Outpatient Expenditures

Physician

1. General Symptoms
2. Diabetes Mellitus
3. Health Supervision of infant or child
4. Symptoms involving respiratory system and other chest symptoms
5. Normal Delivery

= 14.7 percent of all Physician Expenditures

Table 12 - MCO Medical Expenditure by Category of Service*

Category of service	Providers with paid claims	FY 2005 recipients	Expenditures per recipient	FY 2004-2005 Expenditures
Hospital Facilities (Including care provided through hospitals (both Inpatient and Outpatient), Federally Qualified Health Centers (FQHC), Ambulatory Surgical Centers, etc.)	4,300	833,000	\$1,572	\$1,309,296,200
Physician	22,500	1,273,000	\$785	\$ 999,404,700
DME	2,200	115,000	\$670	\$ 77,000,000
Home Health	300	13,400	\$5,097	\$ 68,299,000
Other Services (Transportation, Lab, Hospice)	5,400	604,000	\$320	\$ 193,097,800
Total MCO Services**	31,000	1,184,300	\$2,235	\$ 2,647,097,700

* Expenditure adjusted to reflect services rendered but not yet recorded.

** Total amounts represent unduplicated counts and may not be the mathematical total of the column. Expenditures per recipient may not total due to rounding.

Long Term Care Services

Long term care services are “carved-out” from the remainder of the TennCare managed care program and are managed and reimbursed directly by the State.

- 32,000 Pre-Admission Evaluations are processed each year
- 48 nursing homes in the state are certified as Level 1 (Intermediate Care only); 12 are certified as Level 2 (Skilled Nursing Care) only
- 245 nursing homes are dually certified as both Level 1 and Level 2
- 17 nursing homes are certified as ICF/MR (Intermediate Care Facility for the Mentally Retarded)

Home and community based services (HCBS) are available in limited quantities for those people who are developmentally delayed, mentally retarded and/or elderly who would qualify for ICF admission, but wish to remain in their homes and receive services that are less costly than admission to a long term care center. HCBS plans are operated through waivers with CMS.



Table 14

Category of service	Number of Providers	FY 2004-2005 Institutional Residents	Average Expenditure per enrollee	Total FY 2004-2005 Expenditures
Home and Community-Based Services (HCBS) – Mental Retardation	2*	5,002	\$75,880	\$379,552,500
Home and Community-Based Services (HCBS) – Elderly	68	859	\$24,876	\$21,368,800
Intermediate Care: MR Facility (ICF-MR)	78	1,371	\$198,746	\$272,481,300
Intermediate Care Nursing Facility (Level 1 Facility)	296	26,478	\$31,681	\$946,083,700
Skilled Nursing Facility (Level 2 Facility)	238	2,462	\$43,554	
Total	447	36,172	\$44,772	\$1,619,486,300

Census Data as of December 31, 2004

*Number of providers does not total because some entities provide more than one kind of service. Also, this table reflects only the two billing providers for MR; actual providers of MR HCBS services are in excess of 400.

Mental Health Services Services Delivered through BHOs

- 68 percent of enrollees receiving mental health care are either adults designated as SPMI (Seriously and Persistently Mentally Ill) or children designated as SED (Seriously Emotionally Disturbed)
- Approximately 10 percent of the entire TennCare population are SPMI/SED enrollees
- 78 percent of dollars spent on mental health care are for SPMI/SED enrollees

Top 5 Mental Health Diagnoses by Cost

Inpatient

1. Affective Psychosis
 2. Schizophrenic Disorders
 3. Depressive Disorders
 4. Drug Dependence
 5. Disturbance of Conduct
- = 83.6 percent of all Inpatient Expenditures

Outpatient

1. Affective Psychosis
 2. Schizophrenic Disorders
 3. Disturbance of Conduct
 4. Drug Dependence
 5. Sexual Disorders
- = 71.2 percent of all Outpatient Expenditures

Physician

1. Affective Psychosis
 2. Schizophrenic Disorders
 3. Hyperkinetic Syndrome
 4. Adjustment Reaction
 5. Neurotic Disorders
- = 77.8 percent of all Physician Expenditures

Category of service	Providers with paid claims	FY 2004-2005 recipients	Expenditures per enrollee	FY 2004-2005 Expenditures
Mental Health Clinic and Institutional Services	1,205	202,004	\$2,178	\$440,048,400

Table 15

Dental Services Services Delivered Through the DBM

- During FY 2005, medically necessary services were covered for enrollees under age 21. Enrollees age 21 and over were eligible for dental benefits if they had a life threatening infection, prosthetic heart valve, were severely immunocompromised, had a tumor of the oral cavity, had impacted wisdom teeth or an accidental injury to the oral cavity or teeth.
- 99 percent of dental services provided were for children under age 21.
- 51 percent of TennCare-eligible children received a dental service in FFY 2004.

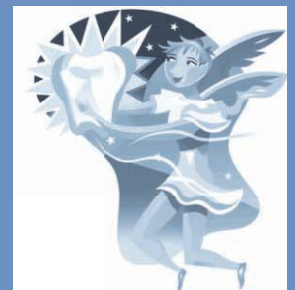


Table 17

Category of service	Providers with paid claims	FY 2005 recipients	Expenditures per recipient	FY 2004-2005 Expenditures
Dental Services	741	318,283	\$445	\$141,661,000

Table 18

TennCare Expenditures and Recipients by County – State Fiscal Year 04/05*

County	TennCare Enrollment on 12/31/2004	Estimated 2005 Tennessee Population	Total TennCare Service Expenditures	Expenditure per Member	% County Expenditure as TennCare Total	% County Enrollment as TennCare Total	% County Population as Tennessee Total
ANDERSON	17,169	71,975	\$96,101,169	\$5,597	1.4%	1.3%	1.2%
BEDFORD	9,309	40,945	\$44,302,553	\$4,759	0.6%	0.7%	0.7%
BENTON	5,363	16,838	\$27,990,252	\$5,219	0.4%	0.4%	0.3%
BLED SOE	3,414	12,868	\$16,230,244	\$4,754	0.2%	0.3%	0.2%
BLOUNT	21,165	112,074	\$115,113,061	\$5,439	1.7%	1.6%	1.9%
BRADLEY	18,623	92,686	\$104,140,687	\$5,592	1.5%	1.4%	1.6%
CAMPBELL	16,333	40,860	\$88,470,691	\$5,417	1.3%	1.2%	0.7%
CANNON	3,291	13,440	\$17,394,936	\$5,286	0.3%	0.2%	0.2%
CARROLL	8,476	30,066	\$49,789,650	\$5,874	0.7%	0.6%	0.5%
CARTER	15,659	57,464	\$87,624,315	\$5,596	1.3%	1.2%	1.0%
CHEATHAM	5,993	38,768	\$30,678,299	\$5,119	0.4%	0.4%	0.7%
CHESTER	3,843	16,426	\$22,242,517	\$5,788	0.3%	0.3%	0.3%
CLAIBORNE	11,999	30,989	\$66,767,489	\$5,564	1.0%	0.9%	0.5%
CLAY	2,906	8,106	\$16,422,256	\$5,651	0.2%	0.2%	0.1%
COCKE	13,172	35,064	\$66,824,305	\$5,073	1.0%	1.0%	0.6%
COFFEE	11,893	50,414	\$61,300,545	\$5,154	0.9%	0.9%	0.8%
CROCKETT	4,045	15,068	\$23,375,880	\$5,779	0.3%	0.3%	0.3%
CUMBERLAND	12,355	50,127	\$70,518,002	\$5,708	1.0%	0.9%	0.8%
DAVIDSON	118,178	592,446	\$593,563,870	\$5,023	8.7%	8.7%	9.9%
DECATUR	3,611	11,850	\$23,337,564	\$6,463	0.3%	0.3%	0.2%
DEKALB	5,040	18,350	\$26,931,878	\$5,344	0.4%	0.4%	0.3%
DICKSON	9,532	45,826	\$52,719,918	\$5,531	0.8%	0.7%	0.8%
DYER	11,661	38,129	\$55,278,857	\$4,740	0.8%	0.9%	0.6%
FAYETTE	7,017	31,295	\$29,579,499	\$4,215	0.4%	0.5%	0.5%
FENTRESS	8,098	17,300	\$44,099,035	\$5,446	0.6%	0.6%	0.3%
FRANKLIN	7,850	40,714	\$40,684,265	\$5,183	0.6%	0.6%	0.7%
GIBSON	13,472	48,640	\$89,030,710	\$6,609	1.3%	1.0%	0.8%
GILES	6,781	30,170	\$35,483,562	\$5,233	0.5%	0.5%	0.5%
GRAINGER	6,769	21,840	\$35,040,093	\$5,177	0.5%	0.5%	0.4%
GREENE**	15,991	64,841	\$166,859,941	\$10,435	2.4%	1.2%	1.1%
GRUNDY	6,284	14,759	\$32,024,141	\$5,096	0.5%	0.5%	0.2%
HAMBLEN	14,443	60,310	\$82,771,435	\$5,731	1.2%	1.1%	1.0%
HAMILTON	62,117	312,491	\$333,671,441	\$5,372	4.9%	4.6%	5.2%
HANCOCK	3,197	6,853	\$15,974,381	\$4,997	0.2%	0.2%	0.1%
HARDEMAN	8,211	29,618	\$39,491,385	\$4,810	0.6%	0.6%	0.5%
HARDIN	8,857	26,501	\$53,336,346	\$6,022	0.8%	0.7%	0.4%
HAWKINS	14,469	55,817	\$74,221,388	\$5,130	1.1%	1.1%	0.9%
HAYWOOD	6,636	19,920	\$27,004,541	\$4,069	0.4%	0.5%	0.3%
HENDERSON	7,104	26,591	\$37,627,115	\$5,297	0.5%	0.5%	0.4%
HENRY	8,370	31,761	\$42,616,430	\$5,092	0.6%	0.6%	0.5%
HICKMAN	6,211	24,186	\$32,741,327	\$5,272	0.5%	0.5%	0.4%
HOUSTON	2,327	8,223	\$13,861,325	\$5,957	0.2%	0.2%	0.1%
HUMPHREYS	4,400	18,469	\$24,676,803	\$5,608	0.4%	0.3%	0.3%
JACKSON	3,653	11,441	\$20,703,977	\$5,668	0.3%	0.3%	0.2%
JEFFERSON	11,958	47,809	\$68,897,913	\$5,762	1.0%	0.9%	0.8%

Table 18 continued

County	TennCare Enrollment on 12/31/2004	Estimated 2005 Tennessee Population	Total TennCare Service Expenditures	Expenditure per Member	% County Expenditure as TennCare Total	% County Enrollment as TennCare Total	% County Population as Tennessee Total
JOHNSON	5,776	18,203	\$29,496,785	\$5,107	0.4%	0.4%	0.3%
KNOX	71,326	396,741	\$380,509,842	\$5,335	5.6%	5.3%	6.7%
LAKE	2,507	7,967	\$15,012,055	\$5,988	0.2%	0.2%	0.1%
LAUDERDALE	8,737	28,449	\$37,554,859	\$4,298	0.5%	0.6%	0.5%
LAWRENCE	10,820	41,329	\$56,093,514	\$5,184	0.8%	0.8%	0.7%
LEWIS	3,645	11,890	\$18,876,835	\$5,179	0.3%	0.3%	0.2%
LINCOLN	7,761	32,510	\$40,153,384	\$5,174	0.6%	0.6%	0.5%
LOUDON	8,219	41,610	\$50,936,515	\$6,197	0.7%	0.6%	0.7%
MACON	6,040	21,568	\$31,297,130	\$5,182	0.5%	0.4%	0.4%
MADISON	23,859	95,487	\$117,140,544	\$4,910	1.7%	1.8%	1.6%
MARION	8,039	28,395	\$39,723,593	\$4,941	0.6%	0.6%	0.5%
MARSHALL	5,542	28,380	\$28,011,732	\$5,054	0.4%	0.4%	0.5%
MAURY	15,563	74,003	\$89,165,603	\$5,729	1.3%	1.1%	1.2%
MEIGS	3,726	11,718	\$21,074,316	\$5,656	0.3%	0.3%	0.2%
MONROE	11,786	41,669	\$62,117,794	\$5,270	0.9%	0.9%	0.7%
MONTGOMERY	23,655	144,724	\$106,076,361	\$4,484	1.5%	1.7%	2.4%
MOORE	958	5,968	\$5,906,597	\$6,166	0.1%	0.1%	0.1%
MORGAN	6,329	20,523	\$31,124,218	\$4,918	0.5%	0.5%	0.3%
MCMINN	12,379	51,196	\$70,235,616	\$5,674	1.0%	0.9%	0.9%
MCNAIRY	9,211	25,165	\$47,484,544	\$5,155	0.7%	0.7%	0.4%
OBION	7,526	32,921	\$37,268,331	\$4,952	0.5%	0.6%	0.6%
OVERTON	5,956	20,669	\$33,205,694	\$5,575	0.5%	0.4%	0.3%
PERRY	1,870	7,734	\$10,930,552	\$5,845	0.2%	0.1%	0.1%
PICKETT	1,738	5,125	\$9,777,097	\$5,625	0.1%	0.1%	0.1%
POLK	4,361	16,469	\$24,370,707	\$5,588	0.4%	0.3%	0.3%
PUTNAM	15,343	66,235	\$85,086,068	\$5,546	1.2%	1.1%	1.1%
RHEA	8,414	29,580	\$44,558,944	\$5,296	0.7%	0.6%	0.5%
ROANE	12,822	53,326	\$78,876,307	\$6,152	1.2%	0.9%	0.9%
ROBERTSON	10,745	59,487	\$57,652,189	\$5,365	0.8%	0.8%	1.0%
RUTHERFORD	30,005	203,987	\$155,584,029	\$5,185	2.3%	2.2%	3.4%
SCOTT	9,759	22,345	\$54,621,490	\$5,597	0.8%	0.7%	0.4%
SEQUATCHIE	3,609	12,201	\$18,817,306	\$5,214	0.3%	0.3%	0.2%
SEVIER	17,832	77,553	\$88,601,265	\$4,969	1.3%	1.3%	1.3%
SHELBY	240,613	928,648	\$871,980,479	\$3,624	12.7%	17.7%	15.6%
SMITH	4,078	18,846	\$23,217,201	\$5,693	0.3%	0.3%	0.3%
STEWART	2,745	13,292	\$13,724,325	\$5,000	0.2%	0.2%	0.2%
SULLIVAN	33,567	154,295	\$176,676,821	\$5,263	2.6%	2.5%	2.6%
SUMNER	23,956	140,685	\$121,447,700	\$5,070	1.8%	1.8%	2.4%
TIPTON	12,715	55,867	\$50,543,554	\$3,975	0.7%	0.9%	0.9%
TROUSDALE	2,189	7,651	\$13,102,741	\$5,986	0.2%	0.2%	0.1%
UNICOI	5,302	17,894	\$35,434,172	\$6,683	0.5%	0.4%	0.3%
UNION	6,180	19,431	\$29,478,119	\$4,770	0.4%	0.5%	0.3%
VAN BUREN	1,748	5,651	\$10,078,742	\$5,766	0.1%	0.1%	0.1%
WARREN	10,816	39,977	\$60,354,191	\$5,580	0.9%	0.8%	0.7%
WASHINGTON	22,211	112,102	\$129,549,060	\$5,833	1.9%	1.6%	1.9%
WAYNE	4,328	17,436	\$26,420,455	\$6,105	0.4%	0.3%	0.3%
WEAKLEY	7,351	35,642	\$40,263,252	\$5,477	0.6%	0.5%	0.6%

Table 18 continues

County	TennCare Enrollment on 12/31/2004	Estimated 2005 Tennessee Population	Total TennCare Service Expenditures	Expenditure per Member	% County Expenditure as TennCare Total	% County Enrollment as TennCare Total	% County Population as Tennessee Total
WHITE	7,038	23,981	\$39,586,724	\$5,625	0.6%	0.5%	0.4%
WILLIAMSON	8,666	144,222	\$51,236,201	\$5,912	0.7%	0.6%	2.4%
WILSON	13,576	97,010	\$73,399,874	\$5,407	1.1%	1.0%	1.6%
OTHER	7,586		\$13,008,783	\$1,715	0.2%	0.6%	0.0%
Total/Average	1,357,768	5,958,085	\$6,854,360,200	\$5,048	100.0%	100.0%	100.0%

* Expenditures include MCO, Pharmacy, LTC and Dental; does not include BHO Services or MCO Administrative costs (reference Table 8).

** Greene County expenditures include costs associated with the Greene Valley Developmental Center, causing the per member cost to appear higher when comparing it to the other counties.

